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# JC20 Recorporation 1 4 OCT 2005

## **Application Data Sheet**

Application Informatio
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Application Type::

Regular

Subject Matter::

Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD\_R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence Submission::

No

Computer Readable Form (CRF)?::

No

Title::

COMBINED TOY/BOTTLECAP SYSTEM

Attorney Docket Number::

20051.1USWO

Request For Early Publication::

No

Request For Non-Publication::

No

Suggested Drawing Figure::

Total Drawing Sheets::

5 Yes

Small Entity::

an = 1111.

Latin Name::

Variety Denomination Name::

Petition Included::

No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?::

No

#### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: AUSTRALIA

Status:: Full Capacity

Given Name:: MATTHEW

Middle Name:: ROBERT

Family Name:: CAHILL

Name Suffix::

City of Residence:: EDEN HILLS

State or Province of Residence:: SOUTH AUSTRALIA

Country of Residence:: AUSTRALIA

Street of mailing address:: 2A MOUNTAIN ROAD

City of mailing address:: EDEN HILLS

State or Province of mailing address:: SOUTH AUSTRALIA

Country of mailing address:: AUSTRALIA

Postal or Zip Code of mailing address:: 5050

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: AUSTRALIA

Status:: Full Capacity

Given Name:: BRADLEY

Middle Name:: ANDREW

Family Name:: WRIGHT

Name Suffix::

City of Residence:: KIDMAN PARK

State or Province of Residence:: SOUTH AUSTRALIA

Country of Residence:: AUSTRALIA

Street of mailing address:: 8 FAIRMONT AVENUE

Initial 10/14/2005

City of mailing address::

KIDMAN PARK

State or Province of mailing address::

**SOUTH AUSTRALIA** 

Country of mailing address::

**AUSTRALIA** 

Postal or Zip Code of mailing address:: 5025

**Correspondence Information** 

Correspondence Customer Number::

52835

Representative Information

Representative Customer Number::

52835

## **Domestic Priority Information**

Application::	Continuation Type::	Parent Application::	Parent Filing Date::
This application	National Phase of	PCT/AU2004/000526	4/22/2004

## Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
AUSTRALIA	2003901913	4/22/2003	Yes

## **Assignee Information**

Assignee Name::

**HUGH THORMAN BUILDER** 

Street of mailing address::

LEVEL 15, 45 PIRIE STREET

City of mailing address::

**ADELAIDE** 

State or Province of mailing address::

**SOUTH AUSTRALIA** 

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**AUSTRALIA** 

Postal or Zip Code of mailing address:: 5025

10/14/2005

Initial